Application for RECORDS DISPOSITION STANDARD

OFFICE OF SECRETARY OF STATE
DEPARTMENT OF ARCHIVES & HISTORY
RECORDS MANAGEMENT DIVISION

	GEORGIA RECURDS DISPUSITION	STANDARD HEC	ORDS MANAGEMENT DIVISION	
1 , Application Date	INSTRUCTIONS: See separate instructions front and reverse of this form. Sign original		RECORDS MANAGEMENT DIVISION to Received Applica	TON USE \ tion _g No. Date Completed
2. Agency Application No.	and forward to Department of Archives and a	History, Attention: MA	AY 1 1973 73-	33.2 MAY 2 1973
	ision & Administering Office Address	4 Pe	rson to Contact	
Georgia Departa Treasurer's Of	ment of Public Safety	Ва	arbara Collinsw	orth
	rate Ave., S. E.	5 · W°	orking Title	6. ren. no. 252
7.ACTION REQUE				
IXI	H DISPOSITION STANDARD; ILL CONTINUE TO ACCUMULATE.			ACCUMULATION; FION ANTICIPATED.

8.Earliest & Latest Dates of Series 9 Exact Series Title
Treasurer's General Subject File

What is the function of the office in which this record series is created?

The Personnel Section shall be responsible for the recruitment and the disengagement of personnel and the preparation and maintenance of personnel records. The Fiscal Services Section shall be responsible for departmental accounting and the preparation of budgets and financial reports. The Firearms License Section is responsible for the enforcement of an Act to Regulate the Sale of Firearms of Less Than Fifteen (15) Inches in Length House Bill 622 (AM). The Logistics Section shall procure supplies and supervise the issuance of and maintenance to supplies and equipment necessary for the success of the Department's mission. The Management Services Section shall provide planning and analytical support, including procedures writing, forms design and control, records management, and reproduction services.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Relates to functions of Treasurer's Office. File consists of correspondence and other material received with copies of replies. Filed by subject by year.

ATTACH SAMPLES OF THE FILE

i 2		N of Downson	Cu. Pt. of Records		No. of D		Cu. Ft. o	Records
Letter-size File Drawers		No. of Dravers		ANNUAL RATE OF ACCUMULATION	1 1/2			
	Legal-size File Drawers	•	-	Floor Space Occupied (Square Feet)	In Offic	ce(e)	In Storag	e Area(s)
,			, S		This Year's	Last Year's	Preceding Year's	
	¥		, <u>*</u>	AVERAGE DAILY REFERENCES	8	3		

Porm: AR-50-71

QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain	YES	NO
13. Is this the Record Copy of the series?	[x]	[]
14. Is there a duplication of this series in another office or agency?	[]	[x]
15. Is the information contained in this series ever summarized or published?	[]	[x]
Attach copy of summary or publication. 16. Does the series contain classified information requiring security handling?	[.]	[x]
17. Does the series initiate, amend or terminate agency policies and procedures?		[x]
18. Could the function be performed if the files were lost or destroyed?	[x]	[]
19. Is the series (or major portion of it) regularly microfilmed? If yes, why?	[]	[x]
20. Does the record series provide data as input to an EDP file?	[]	[x]
21. Does the record series contain documentation produced as EDP printout?	[]	[x]
22. Has the Federal Government issued instructions governing the retention/disposition of these files?	.[]	[x]
23. Will there be a need for these records 10, 15 years from now? If yes, what?	[x]	[]
24. REQUIREMENTS. The following requires the files to be kept		
LAW LIMITATION PERIOD LAW DECISION VALU (Cite Law, Statute, or other reason for the retention requirement)		
25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at of each - [*] CALENDAR YEAR -[]FISCAL YEAR -[]OTHER	the e	
<pre>[*] Hold in the current files areamonth(s)/2 year(s): [] Transfer to [] State Records Center [] Local Holding Area; holdyear(</pre>	s):	1
[x] Transfer to State Archives for permanent retention. [] Destroy immediately after cut-off. [] Other: (Specify)	• •	
(X) Concur () Nonconcur Signature of Treasurer	,	
	•	
(Indicate briefly rationale for recommendations above/or write additional remark	ks):	
Records Management Officer (Signature) Date OTHER REQUIRED SIGNATURES	DA	TE
in paragraph 25 Approved Disapproved O By	4.9	/ <u>. </u>
are: State Auditor/Designee	5-7-	
STATE RECORDS Secretar fof State/Designee Consoll Hart	4-30	
Attorney General/Designee [1] Approved [] Disapproved AMI Tuell	1:3	L-77
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